## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number 500 88 = 65 7

- 2.

CLAIMS AS FILED - PART I SMALL ENTITY OTHER THAN (Column 1) (Column 2) TYPE OR SMALL ENTIT												
TOTAL CLAIMS			14					RATE	FEE	1	RATE	FEE
FOR			NUMBER FILED		NUMB	ER EXTRA		BASIC FEE	355.00	OR	BASIC FEE	710.00
TC	TAL CHARGEA	ABLE CLAIMS	(4 minus 20=		$\cdot$ $\phi$			X\$ 9=		OR	X\$18=	_
INDEPENDENT CLAIMS				√ minus 3 =		* <b>\$</b>		X40=		OR	X80=	
MULTIPLE DEPENDENT CLAIM PRESENT								+135=		OR	+270=	
* If the difference in column 1 is less than zero, enter "0" in c						olumn 2	١	TOTAL	·	OR	TOTAL	7/0
CLAIMS AS AMENDED - PART II										•	OTHER	
		(Column 1)		(Colur		(Column 3)		SMALL	ENTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 14	Minus			=		X\$ 9=		OR	X\$18 <b>⇒</b>	
	Independent	NTATION OF M	Minus	***	CL AIM			X40=		OR	X80=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+135=		OR	+270= /	
								TOTAL ADDIT. FEE			TOTAL ADDIT, FÉE	
(Column 1) (Column 2) (Column 3)										ADDI1. 1 CE		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	ŧ	RATE	ADDI- TIONAL ) FEE
	Total	. 14	Minus	**		=		X\$ 9=	<b>\</b>	OR	X\$18 <b>=</b>	· .
AME	Independent	· 2	Minus			]=	11	X40=		OR	X80=	
	FIRST PRESE	NTATION OF MU	JUITPLE DEF	ENDEN	CLAIM		ا ا	+135=		OR	+270=	
							L	TOTAL ADDIT. FEE	-		TOTAL Addit. Fee	
		(Column 1)		(Colur	nn 2)	(Column 3)		10011. T EE 6			ADDII. 1 E.E.	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	·	RATE	ADDI- TIONAL FEE
	Total	12	Minus	- 2	6	=	$\prod$	X\$ 9=		OR	X\$18=	
	Independent	. 4	Minus	***	3	=	11	X40=		OR	X80=	8400
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						J	+135=		OR	+270=	-
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Proviously Poid For" IN THIS SPACE is less than 30 center "20".												
***	lf the "Highest Nu	mber Previously Pa mber Previously Pa mber Previously Pa	aid For" IN THI	S SPACE	s less tha	n 3, enter "3."	_	DDIT. FEE <b>L</b> nd in the app	ropriate box	,	ADDIT. FEE ( umn 1.	